# **Chris Aquino**

From: WMATC E-Filing <administrator@wmatc.gov>
Sent: Wednesday, January 14, 2015 9:28 AM
To: Constantine Kolouas; Chris Aquino

**Subject:** 2015 Annual Report - WMATC No: 1537, Carrier Name: Rock Creek Limousine Service,

Inc.

# **Washington Metropolitan Area Transit Commission**

2015 Carrier Annual Report Form

### **FILING INFORMATION:**

- Each carrier holding a WMATC certificate of authority on January 1, 2015, must file a complete 2015 annual report and pay a \$150 annual fee on or before **February 2, 2015.** To be timely, the report and fee must be received at WMATC's office by 4:30 p.m. (or submitted online by 11:59 p.m.) on that date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (\*) must be completed. If any information is missing or incorrect, make all necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a \$150 late fee. Each carrier that fails to pay the \$150 annual fee on time will be assessed a separate \$150 late fee.
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 1, 2015.
- Filing an annual report containing false information, or omitting information, may result in the assessment of a civil forfeiture.

Read the accompanying instructions carefully before completing this form.

#### 1. ANNUAL REPORT OF:

**WMATC No.:** 1537

Name of Carrier (as shown on certificate of authority): Rock Creek Limousine Service, Inc.

**Trade Name:** 

**Principal Place of Business** 

Street Address: 3101 S. Manchester Street

**Apt./Suite:** 317 **City:** Falls Church

**State:** VA **Zip:** 22044

**Mailing Address (if different from street address)** 

**Street:** 

Apt./Suite:
City:
State:
Zip:
Telephone Number: 3014529492
Other Telephone: 3014529492
Fax Number:
E-mail: fdcrain@rockcreeklimousine.com
2. OTHER PASSENGER CARRIER AUTHORITY (if applicable, list carrier/permit number):
<b>USDOT No.:</b> 1768994
DCTC No.:
Virginia DMV passenger carrier No.: 741
Maryland PSC No.:
3. CARRIER CONTACT PERSON (at mailing address to whom we should direct inquiries):
Name: Francis D. Crain
Title: President
Telephone Number: (301)452-9492
Other Telephone: (703)575-4445
Fax Number:
E-mail: fdcrain@rockcreeklimousine.com
<b>4. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS</b> *Complete section 4 only if the principal place of business in section 1 is outside the Metropolitan District. The Metropolitan District includes the District of Columbia, Prince George's Co., Montgomery Co., Alexandria Arlington, Fairfax, Falls Church, and Dulles Airport. For a full description, see <a href="www.wmatc.gov">www.wmatc.gov</a> .
Name of Registered Agent for Service of Process:
Agent Address:
Apt./Suite:
City:
State:
Zip:
Telephone Number:
E-mail:
<b>5.</b> *CHANGES: Describe any merger, consolidation or other change in management, ownership, control, o form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no sucl
changes have occurred.

Kevin Drummond Crain has resigned from our board of directors

**6. \*LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS:** (1) list your vehicles below or (2) upload a complete vehicle list to this form. If you have more than 10 vehicles in your fleet, you must use option 2. Include all required information.

Fleet No.	Year	Make	Vehicle VIN	License Plate	State	Seating Cap.	Wheel Chair
	2006	Lincoln	1L1FM88W96Y626658	H516040	VA	9	No
	2007	Lincoln	1LNHM84W57Y623545	H516038	VA	6	No
	2007	Lincoln	1LNHM85V47Y620318	H516072	VA	6	No
	2008	Chevrolet	3GNFK16368G107726	H516039	VA	7	No

# 7. \*CERTIFICATION:

I certify that this report, including any attachments, was prepared by me and under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

Name: Francis D. Crain

**Title:** President **Date:** 01/14/2015

<sup>\*</sup>Filer has chosen vehicle list option (1), vehicles listed above. No vehicle list file was uploaded.